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United States Bankruptcy Court
of the
Northern District Of Illinois
Western Division

Trustee's Final Report

In Re: GARY D. CHRISTEN & MARY E. CHRISTEN
306 NORTH 5TH STREET
OREGON, IL 61061

Case Number: 05-74521
SSN-xxx-xx-1767 & xxx-xx-6849

Case filed on: 9/1/2005
Plan Confirmed on: 10/28/2005

P Discharged Paid Out

Total funds received and disbursed pursuant to the plan: \$63,044.09

Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
772	CLERK OF U.S. BANKRUPTCY COURT	0.00	0.00	0.00	0.00
	Total Administration	0.00	0.00	0.00	0.00
000	ATTORNEY GARY C FLANDERS	2,735.22	2,735.22	2,735.22	0.00
	Total Legal	2,735.22	2,735.22	2,735.22	0.00
211	DIRECT LOAN SERVICING CENTER	0.00	0.00	0.00	0.00
	Total Legal	0.00	0.00	0.00	0.00
999	GARY D. CHRISTEN	0.00	0.00	14.10	0.00
	Total Debtor Refund	0.00	0.00	14.10	0.00
001	BYRON BANK	66,331.62	0.00	0.00	0.00
002	HOMEcomings FINANCIAL	38,565.52	0.00	0.00	0.00
	Total Secured	104,897.14	0.00	0.00	0.00
003	LVNV FUNDING LLC	8,854.63	8,854.63	8,854.63	0.00
004	BANK OF AMERICA	0.00	0.00	0.00	0.00
005	BANK OF AMERICA	0.00	0.00	0.00	0.00
006	BELVIDERE PHYSICAL THERAPY	0.00	0.00	0.00	0.00
007	SMC	114.62	114.62	114.62	0.00
008	LVNV FUNDING LLC	2,067.90	2,067.90	2,067.90	0.00
009	ECAST SETTLEMENT CORPORATION	7,437.14	7,437.14	7,437.14	0.00
010	ECAST SETTLEMENT CORPORATION	11,582.07	11,582.07	11,582.07	0.00
011	US DEPARTMENT OF EDUCATION	10,863.34	0.00	0.00	0.00
012	ECAST SETTLEMENT CORPORATION	2,008.84	2,008.84	2,008.84	0.00
013	KOHL'S DEPARTMENT STORE	1,128.18	1,128.18	1,128.18	0.00
014	KSB HOSPITAL	0.00	0.00	0.00	0.00
015	KSB MEDICAL GROUP	0.00	0.00	0.00	0.00
016	LUKE CHRISTEN	0.00	0.00	0.00	0.00
017	ECAST SETTLEMENT CORPORATION	9,096.78	9,096.78	9,096.78	0.00
018	MBNA	0.00	0.00	0.00	0.00
019	ECAST SETTLEMENT CORPORATION	1,823.78	1,823.78	1,823.78	0.00
020	LVNV FUNDING LLC	1,666.59	1,666.59	1,666.59	0.00
021	NATIONAL CITY BANK	0.00	0.00	0.00	0.00
022	NORTHERN ILLINOIS IMAGING	0.00	0.00	0.00	0.00
023	RADIOLOGY CONSULTANTS ROCKFORD	0.00	0.00	0.00	0.00
024	ROCK VALLEY CHIROPRACTIC	0.00	0.00	0.00	0.00
025	ROCKFORD ANESTHESIOLOGISTS ASSOC	140.00	140.00	140.00	0.00
026	LVNV FUNDING LLC	10,179.03	10,179.03	10,179.03	0.00
027	SWEDISH AMERICAN HOSPITAL	0.00	0.00	0.00	0.00
028	SWEDISH AMERICAN MEDICAL GROUP	174.18	174.18	174.18	0.00
029	WILLIAM B. FORD	0.00	0.00	0.00	0.00
	Total Unsecured	67,137.08	56,273.74	56,273.74	0.00
	Grand Total:	174,769.44	59,008.96	59,023.06	0.00

Total Paid Claimant: \$59,023.06
Trustee Allowance: \$4,021.03
Percent Paid Unsecured: 100.00

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer
Lydia S. Meyer, Trustee

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This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 02/26/2009

By /s/Heather M. Fagan